

The AI-powered compliance layer for deaf patient communication.

Real-time, two-way sign language ↔ speech translation. No human interpreter. No scheduling. Orchestrating six live Bittensor subnets into the first product to solve a federal legal mandate every healthcare facility in America is currently failing.

1.1M+	\$4.5B	\$10B	0	2–55x	\$75K+
US FACILITIES REQUIRED	TAM BY 2033 · 15.4% CAGR	LEGACY MARKET DISRUPTED	BIDIRECTIONAL APPS AT SCALE	CHEAPER THAN ALTERNATIVES	DOJ FIRST-VIOLATION FINE

THE LEGAL MANDATE

A non-discretionary market. A captive buyer.

ADA Titles II & III + Section 1557 require every healthcare provider regardless of size to provide effective deaf communication at no cost to the patient. No size exemption for private providers.

- 6,120+ hospitals and 900,000+ physician offices legally required today
- HHS May 2024: Updated Section 504 — new digital standards, enforcement 2026–2028
- 59% of addiction facilities & 41% of mental health: zero ASL support today
- 64.4% of deaf patients miss half or more of critical medical information
- <14,000 certified ASL interpreters serve 48M Americans — a declared national crisis
- 40% of interpreters projected lost by 2030 · 5–10 yr cert pipeline — can't hire out of it

DOJ ENFORCEMENT — ALL ASL-SPECIFIC

Washington Health Plan — 400 ASL failures, 41 facilities	\$1M fund	Oct 2021
Polyclinic / Optum Care WA — deaf/blind patients denied	\$400K	Dec 2025
Spotsylvania Regional MC — 9 hospitalizations, no ASL	\$121K	2017
DOJ Barrier-Free Health Care Initiative — 4th in 3 yrs	Active	Ongoing

TECHNOLOGY STACK — COMPOSING LIVE BITTENSOR INFRASTRUCTURE

SN78	Vocence — Lead dev partner. Speech synthesis + orchestration build.	SN59	BabelBit — Sub-3-second predictive multilingual translation.
TEE	Targon/Chutes — Intel TDX confidential compute. HIPAA-ready.	SN44	Score Vision — Real-time hand skeleton keypoints at 30fps.
SN85	Vidaio — Video pipeline. Signing avatar to deaf user.	STO	Hippius — Encrypted blockchain storage. Continuous learning.

COST COMPARISON — ARE WE CHEAPER?

FACILITY	CURRENT ANNUAL COST	SIGNORA	MULTIPLE
Solo clinic / dental / derm	\$12K–\$31K/yr	\$2K–\$6K	2–15x
Urgent care (walk-in only)	\$19K+ VRI	\$2K–\$6K	3–10x
Mental health (non-compliant)	\$0 + \$75K fine risk	\$2K–\$8K	37x ROI
Mid-size hospital	\$156K–\$432K/yr	\$8K–\$20K	8–54x
Large hospital system	\$500K–\$3.3M+/yr	\$40K–\$60K	10–55x

Sources: AMN Healthcare Aug 2025 · HFMA 2022 (Carolinas \$3.3M/yr) · Interpreters Unlimited · GLOBO Language Services

PRICING TIERS

TIER	TARGET	PRICE/YR	KEY ADD
Tier 1 — Clinic	Solo, dental, urgent care, small MH	\$2K–\$6K	3 devices · BAA · 24/7
Tier 2 — Hospital	50–500 bed hospitals, multi-dept	\$8K–\$20K	25 devices · analytics · Joint Commission
Tier 3 — Enterprise	Multi-site, IDNs, national chains	\$40K–\$60K	Unlimited · Epic/Cerner · SLA · custom BAA

WHY BIG TECH STRUCTURALLY LOSES

Self-Improving Model Trains continuously from live consented usage. Big Tech: quarterly static retraining.	300+ Sign Languages Global competitive miners. Google/Microsoft: handful of profitable languages.
HIPAA-Native Privacy Intel TDX TEE — cryptographically blind. Inherited, not bolted on.	Network Economics dTAO value accrues to token holders. Big Tech: zero network ownership.

GO-TO-MARKET & REVENUE STREAMS

- Phase 1 (Mo 1–12): Healthcare B2B — ADA compliance officers · 50–200 contracts · \$10K–\$60K/yr
- Phase 2 (Mo 6–18): Consumer — Deaf individuals · freemium · 100K+ users · \$4.99–\$19.99/mo
- Phase 3 (Yr 2–3): Platform — Telehealth · legal · conferencing · API/SDK per-call licensing
- Network Accrual: 18% subnet emissions captured via Bittensor protocol — continuously

SEED RAISE	\$400–450K	\$240–280K	\$180–220K	\$100–140K	STRUCTURE
\$1M	SUBNET SLOT YIELD-BEARING · RECOVERABLE	PRODUCTION BUILD VOCENCE-LED ORCHESTRATION	SALES & MARKETING HOSPITAL PIPELINE BUILD	COMPLIANCE & RUNWAY BAA · HIPAA · OPERATIONS	Delaware C-Corp (equity) + Wyoming LLC (token) Founder controls both